



PTO/SB/17 (12-04v2)

Approved for use through 7/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCEAP  
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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL

## For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

<b>TOTAL AMOUNT OF PAYMENT</b>	<b>( \$ )</b>	<b>120.00</b>
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**Complete if Known**

Application Number	09/760,795
Filing Date	January 17, 2001
First Named Inventor	Satoshi SETO
Examiner Name	H. A. El Chanti
Art Unit	2157
Attorney Docket No.	2091-0229P

**METHOD OF PAYMENT** (check all that apply)

Check     Credit Card     Money Order     None     Other (please identify): \_\_\_\_\_  
 Deposit Account    Deposit Account Number: 02-2448    Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below     Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17     Credit any overpayments

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 (including Reissues)

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>
- 20 =	x	=			50	25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 20 =	x	=	

<u>Multiple Dependent Claims</u>	
<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 3 =	x	=	

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**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/50	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1251 Extension for response within first month

120.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	32,181	Telephone	(703) 205-8000
Name (Print/Type)	Marc S. Weiner			Date	January 9, 2006



MS AF  
REPLY UNDER 37 C.F.R. § 1.116  
EXPEDITED PROCEDURE  
EXAMINING GROUP

Docket No.  
2091-0229P

AMENDMENT TRANSMITTAL LETTER					
Application No. 09/760,795	Filing Date January 17, 2001	Examiner H. A. El Chanti		Art Unit 2157	
Applicant(s): Satoshi SETO					
Invention: IMAGE EDITING METHOD AND SYSTEM					
<b>MS AF</b> <b>Commissioner for Patents</b> <b>P.O. Box 1450</b> <b>Alexandria, VA 22313-1450</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
Total Claims	52	- 52 =	0	Rate	
Independent Claims	10	- 10 =	0	x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month					120.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					120.00
<input checked="" type="checkbox"/> Large Entity			<input type="checkbox"/> Small Entity		
<input type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. 02-2448 in the amount of \$ . A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> A check in the amount of \$ 120.00 to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
			Dated: January 9, 2006		
Marc S. Weiner Attorney Reg. No.: 32,181					
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000					



PTOL-413A (09-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

# **Applicant Initiated Interview Request Form**

Application No.: 09/760,795 First Named Applicant: Satoshi SETO  
Examiner: H. A. El Chanti Art Unit: 2157 Status of Application: After Final Reply Filed 1/9/06

### **Tentative Participants:**

(1) H. A. El Chanti (2) Catherine M. Voisinet  
(3) \_\_\_\_\_ (4) \_\_\_\_\_

**Proposed Date of Interview:** \_\_\_\_\_ **Proposed Time:** \_\_\_\_\_ (**AM/PM**)

**Type of Interview Requested:**

(1)  Telephonic      (2)  Personal      (3)  Video Conference

**Exhibit To Be Shown or Demonstrated:**  YES  NO

**If yes, provide brief description:** \_\_\_\_\_

## **Issues To Be Discussed**

Issues (Rej., Obj., etc)	Claims/ Fig. #s	Prior Art	Discussed	Agreed	Not Agreed
As set forth in concurrently (1) <u>filed Reply</u>	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(2) _____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Continuation Sheet Attached

**Brief Description of Arguments to be Presented:**

For more information about the study, please contact Dr. John Smith at (555) 123-4567 or via email at [john.smith@researchinstitute.org](mailto:john.smith@researchinstitute.org).

**An interview was conducted on the above-identified application on**

**NOTE:**

**This form should be completed by applicant and submitted to the examiner in advance of the interview (see MPEP §713.01).**

This application will not be delayed from issue because of applicant's failure to submit a written record of this interview. Therefore, applicant is advised to file a statement of the substance of this interview (37 CFR 1.133(b)) as soon as possible.

Applicant/Applicant's Representative Signature

**Examiner/SPE Signature**

**Typed/Printed Name of Applicant or Representative**

**Registration Number, if applicable**